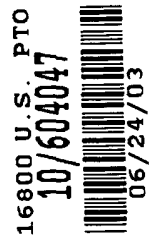


Electronic Filing System (EFS) Data
Electronic Patent Application Submission
USPTO Use Only



EFS ID: 42345
Application ID: 10604047
Title of Invention: Watt Power Device
First Named Inventor: Sylvester Wood
Domestic/Foreign Application: Domestic Application
Filing Date: 2003-06-24
Effective Receipt Date: 2003-06-24
Submission Type: Utility Patent Filing
Filing Type: new-utility
Confirmation number: 1046
Attorney Docket Number: 88-001



Total Fees Authorized: 420.0
Payment Category: Credit Card
Credit Card Number: *****6859
Expiration Date: 09302004
Card Holder Name: Mitchell A. Smolow
Postal Code: 18708
RAM Payment Status: RAM success
RAM User ID: EFSPROD
RAM Accounting Date: 2003-06-24
RAM Sequence Number: 719488

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Trademark Office,ou=Department of Commerce,o=U.S. Government,c=US
Certificate Message Digest: 5ed6f1ebb5039153ab9f58677f2fbe2f3315f2f4

TRANSMITTAL

Electronic Version v1.1

Stylesheet Version v1.1.0

Title of Invention	Watt Power Device																
<p>Application Number:</p> <p>Date:</p> <p>First Named Applicant: Mr. Sylvester Wood</p> <p>Confirmation Number:</p> <p>Attorney Docket Number: 88-001</p>																	
<p>I hereby certify that the use of this system is for OFFICIAL correspondence between patent applicants or their representatives and the USPTO. Fraudulent or other use besides the filing of official correspondence by authorized parties is strictly prohibited, and subject to a fine and/or imprisonment under applicable law.</p> <p>I, the undersigned, certify that I have viewed a display of document(s) being electronically submitted to the United States Patent and Trademark Office, using either the USPTO provided style sheet or software, and that this is the document(s) I intend for initiation or further prosecution of a patent application noted in the submission. This document(s) will become part of the official electronic record at the USPTO.</p>																	
<table border="1" style="width: 100%;"><tr><td style="width: 40%; text-align: center;">Submitted by:</td><td style="width: 30%; text-align: center;">Elec. Sign.</td><td style="width: 30%; text-align: center;">Sign. Capacity</td></tr><tr><td>Dr. Mitchell A. Smolow Registered Number: 43,140</td><td>/Mitchell A. Smolow/</td><td>Attorney</td></tr></table>		Submitted by:	Elec. Sign.	Sign. Capacity	Dr. Mitchell A. Smolow Registered Number: 43,140	/Mitchell A. Smolow/	Attorney										
Submitted by:	Elec. Sign.	Sign. Capacity															
Dr. Mitchell A. Smolow Registered Number: 43,140	/Mitchell A. Smolow/	Attorney															
<table style="width: 100%;"><tr><td style="width: 50%;">Documents being submitted</td><td style="width: 50%;">Files</td></tr><tr><td>us-request</td><td>Wood-usrequ.xml</td></tr><tr><td></td><td>us-request.dtd</td></tr><tr><td></td><td>us-request.xsl</td></tr><tr><td>us-fee-sheet</td><td>Wood-usfees.xml</td></tr><tr><td></td><td>us-fee-sheet.xsl</td></tr><tr><td></td><td>us-fee-sheet.dtd</td></tr><tr><td>us-ids</td><td>Wood-usidst.xml</td></tr></table>		Documents being submitted	Files	us-request	Wood-usrequ.xml		us-request.dtd		us-request.xsl	us-fee-sheet	Wood-usfees.xml		us-fee-sheet.xsl		us-fee-sheet.dtd	us-ids	Wood-usidst.xml
Documents being submitted	Files																
us-request	Wood-usrequ.xml																
	us-request.dtd																
	us-request.xsl																
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	us-fee-sheet.xsl																
	us-fee-sheet.dtd																
us-ids	Wood-usidst.xml																

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sheet2.tif
sheet3.tif

us-declaration	sheet4.tif dec2.tif
Comments Drawings are INFORMAL drawings.	

FEE TRANSMITTAL

Electronic Version v08

Stylesheet Version v08.0

**Title of
Invention**

Watt Power Device

Application Number:

Date:

First Named Applicant: Mr. Sylvester Wood

Attorney Docket Number: 88-001

TOTAL FEE AUTHORIZED \$420

Patent fees are subject to annual revisions on or about October 1st of each year.

Filing as small entity

BASIC FILING FEE

Fee Description	Fee Code	Amount \$	Fee Paid \$
Utility Filing Fee	2001	375	375
Subtotal For Basic Filing Fee: \$375			

EXTRA CLAIM FEES

Fee Description	Extra Claims	Fee Code	Amount \$	Fee Paid \$
Total Claims: 25	5	2202	9	45
Independent Claims: 2	0	2201	42	0
Subtotal For Extra Claims Fees: \$ 45				

AUTHORIZED BILLING INFORMATION

The commissioner is hereby authorized to charge indicated fees and credit any overpayments to:

Credit account number: 6859

Expiration Date (YYYYMMDD): 2004-09-30

Authorized name: Mitchell A. Smolow

